

RECEIVED  
CENTRAL FAX CENTER

JUL 09 2004

OFFICIAL

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of

DESPONT et al.

Application No. 10/672,940

Filed: 09/26/2003

For: DEVICE FOR CONTACTING  
AND/OR MODIFYING A  
SURFACE HAVING A  
CANTILEVER AND A METHOD  
FOR PRODUCTION OF SAID  
CANTILEVER

Group Art Unit: 2856

Examiner: LARKIN, Daniel S.

Attorney Docket No.  
IBM1P051/CH919990048US2

Date: July 9, 2004

FEE  
ONLYCERTIFICATE OF FACSIMILEI hereby certify that this correspondence is being facsimile  
transmitted to the Commissioner for Patents via facsimile to faxAllowed claims


Applicants acknowledge and appreciate allowance of claims 12 and 14.

Accordingly, claims 12 and 14 have been rewritten in independent form to include all of  
the limitations of the base claim and any intervening claims.

In the event a telephone conversation would expedite the prosecution of this  
application, the Examiner may reach the undersigned at (408) 971-2573. For payment  
of any additional fees due in connection with the filing of this paper, the Commissioner  
is authorized to charge such fees to Deposit Account No. 09-0466 (Order No.  
CH919990048US2).

Respectfully submitted,

By:

  
Dominic M. Kotab  
Reg. No. 42,762

Date:

7/9/04

Silicon Valley IP Group, PC  
P.O. Box 721120  
San Jose, California 95172-112007/23/2004 LSPRIELL 00000002 090/466 10672940  
01 FC:1201 86.00 DA

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

106 72940

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	9	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	9 minus 20 = *	—
INDEPENDENT CLAIMS	minus 3 = *	—
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 20	Minus ** 20	= —
Independent	* 4	Minus *** 3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
X\$ 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	770.00
X\$18=	
X86=	
+290=	
TOTAL	770.00

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	86.00
+290=	
TOTAL ADDIT. FEE	86.00

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL ADDIT. FEE	